



## MUNICIPAL CAMPAIGN FINANCIAL DISCLOSURE

Barbara Ellen Leek

Full name of candidate

90 South Church Street

Address

Canselino

Name of office

1. Total contributions (Form "A" total)	\$ 0
2. Total campaign expenses (Form "B" total)	\$ 0
3. Balance at the end of the reporting period	\$ 0

10-25-17

Date

Barbara E. Leek

Signature of Candidate

## MUNICIPAL CAMPAIGN FINANCIAL DISCLOSURE

Roland Michael Erkkila

Full name of candidate

HC 35 BOX 280 Scofield Utah 84526

Address

Mayor

Name of office

1. Total contributions (Form "A" total)	\$ <u>0</u>
2. Total campaign expenses (Form "B" total)	\$ <u>0</u>
3. Balance at the end of the reporting period	\$ <u>0</u>

10-25-17

Date

Roland Michael Erkkila

Signature of Candidate

Paul

## MUNICIPAL CAMPAIGN FINANCIAL DISCLOSURE

Paul M. Hechten

Full name of candidate

Hc 35 Box 268 Scottfield WI

Address

COUNCIL

Name of office

1. Total contributions (Form "A" total)	\$ 0
2. Total campaign expenses (Form "B" total)	\$ 0
3. Balance at the end of the reporting period	\$ 0

06/30-17 Paul M. Hechten

Date

Signature of Candidate

Ron

## MUNICIPAL CAMPAIGN FINANCIAL DISCLOSURE

Ron Lichman

Full name of candidate

631 W. CHRISTINA ST. 84526

Address

Mayor

Name of office

1. Total contributions (Form "A" total)	\$ <u>0</u>
2. Total campaign expenses (Form "B" total)	\$ <u>0</u>
3. Balance at the end of the reporting period	\$ <u>0</u>

10-25-17  
Date

Ron Lichman  
Signature of Candidate

## MUNICIPAL CAMPAIGN FINANCIAL DISCLOSURE

*Scott H Deem*

Full name of candidate

*130 North Railroad street*

Address

*City Town Council*

Name of office

1. Total contributions (Form "A" total)	\$ 0
2. Total campaign expenses (Form "B" total)	\$ 0
3. Balance at the end of the reporting period	\$ 0

*10/25/17*  
Date

*Scott H Deem*  
Signature of Candidate

# MUNICIPAL CAMPAIGN FINANCIAL DISCLOSURE

SCOTT HOLMAN

Full name of candidate

320 CHURCH STREET SCOTFIELD, UTAH 84526

Address

COUNCIL

Name of office

1. Total contributions (Form "A" total)	\$ 0
2. Total campaign expenses (Form "B" total)	\$ 0
3. Balance at the end of the reporting period	\$ 0

OCTOBER 30, 2017

Date



Signature of Candidate